

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Initial Filing Received
Official Use Only

STATE TREASURER
STATE OF CALIFORNIA
2018 MAR 28 PM 3:43
ADMINISTRATION

Please type or print in ink.

NAME OF FILER (LAST) Schaefer (FIRST) Timothy

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

STATE TREASURER

Division, Board, Department, District, if applicable

Your Position

Deputy Treasurer and Designee

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: See page 2 attached list

Position: Designee

2. Jurisdiction of Office (Check at least one box)

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of _____

Other _____

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2017, through December 31, 2017.

Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2017.

The period covered is January 1, 2017, through the date of leaving office.

-or-

The period covered is ____/____/____, through the date of leaving office.

Assuming Office: Date assumed ____/____/____

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 3 see list

Schedules attached

Schedule A-1 - Investments - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached

Schedule A-2 - Investments - schedule attached

Schedule D - Income - Gifts - schedule attached

Schedule B - Real Property - schedule attached

Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

(Business or Agency Address Recommended - Public Document)

915 Capitol Mall Room 110

Sacramento

CA

95814

DAYTIME TELEPHONE NUMBER

(916) 657-3218

E-MAIL ADDRESS

tschaefer@treasurer.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 28, 2018
(month, day, year)

Signature 
(File the originally signed statement with your filing official.)

STATEMENT OF ECONOMIC INTERESTS

Cover page attachment

For Form CA 700

Timothy J. Schaefer

Agency Name	Division, Board, Department, District	Position or Title	Jurisdiction	Type of Statement	Period Covered
Treasurer's Office	Public Finance	Deputy Treasurer	State of California	Annual	01/01/17-12/31/17
Business and Consumer Services Agency	Housing and Finance Agency Board	Designee	State of California	Annual	01/01/17-12/31/17
Business and Consumer Services Agency	Housing and Community Development "No Place Like Home Advisory Committee"	Designee/ Board Member	State of California	Annual	01/01/17-12/31/17
California State University	Investment Advisory Committee	Board Member/ Designee	State of California	Annual	01/01/17-12/31/17
Governor's Office of Business and Economic Development	California Infrastructure and Economic Development Bank	Alternate Designee	State of California	Annual	01/01/17-12/31/17
(No Parent Agency)	The California Earthquake Authority	Alternate Designee To the Governing Board	State of California	Annual	01/01/17-12/31/17

